

## IOWA DEPARTMENT OF NATURAL RESOURCES AIR QUALITY BUREAU



## Initial Notification for Compression Ignition Engines<sup>a</sup>

REC'D

NESHAP for Reciprocating Internal Combustion Engines
40 Code of Federal Regulations (CFR) 63.6580 – 63.6675 (Subpart ZZZZAUG 1 2 2010

AFCO

## **Facility Information**

Name of Firm/Company:	Facility Name (if different):		Facility Number (if known):		
Traer Municipal Utilities				86-03-004	
Equipment Location - Street:		City:		State:	Zip:
649 2nd St		Traer		IA	50675
Mailing Address (if different):		City:		State:	Zip:
Person to Contact:	Phone number:		Email (if available):		
Pat Stief	319-478-8760		pstief@traer.net		
This facility is a (please choose one):  Major source: potential or actual of (HAP) or 25 tons of a combination of	•	10 tons	of any single	hazardous air	pollutant
	emissions below major	r source l	evels		
Identification of Standard					
Yes, this facility is subject to 40 CF Pollutants for Reciprocating Internal Co				andards for Ha	zardous Air

This is an example of the type of information that must be submitted to fulfill the Initial Notification requirement of 40 CFR 63, Subpart ZZZZ. You may submit the information in another form or format, or you may use this form.